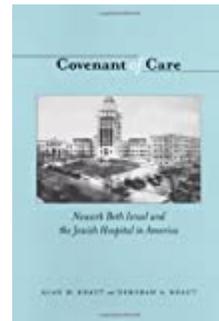




**Alan M. Kraut, Deborah A. Kraut.** *Covenant of Care: Newark Beth Israel and the Jewish Hospital in America.* New Brunswick: Rutgers University Press, 2006. 328 pp. \$30.35 (cloth), ISBN 978-0-8135-3910-2.



**Reviewed by** Sandra Moss (Medical History Society of New Jersey)

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## **An Institutional Biography of a Newark Hospital**

The term “institutional history” does not do credit to *Covenant of Care: Newark Beth Israel and the Jewish Hospital in America* by Alan M. Kraut and Deborah A. Kraut. Alan Kraut is a professor of history at the American University in Washington and has previously published *Silent Travelers: Germs, Genes, and the “Immigrant Menace”* and *Goldberger’s War: The Life and Work of a Public Health Crusader* (members of the Goldberger family lived in Perth Amboy for a time). Deborah Kraut is an independent scholar.

“The Beth,” as everyone calls the century-old hospital, grew and changed organically, and the Krauts have produced something akin to an institutional “biography.” It is at once a history of Jewish (and by extension, sectarian) hospitals in America and a history of the evolution of voluntary hospitals in the changing health care superstructure. On a more intimate scale, this is the story of a once-thriving Jewish immigrant community viewed through the lens of health and sickness. Through the same lens, we catch a glimpse of Newark itself as it made its way through the twentieth century.

In tone, this book reads like the saga of big Jewish

immigrant family—full of colorful and often squabbling personalities, cultural dislocations, big dreams, financial woes, intergenerational schisms, and, for want of a better term, assimilation in all its aspects. Since the subject is life and death and the main characters are the People of the Book, the authors, from time to time, draw on Jewish ethics to anchor their story in history. The duty of *tikkun olam*—repairing the world—fits in nicely with the progressive spirit that confident men and women harnessed to build the brave new American hospital of a century ago.

Because they deal with such wide-ranging events, the Krauts have taken care to organize their book both chronologically and thematically. The authors draw on a century of institutional and organizational records and papers, bringing solid academic scholarship and a flair for storytelling to their project. A brief introduction brings the reader up to speed with concise explanations of the Jewish hospital movement and structure of Newark’s Jewish community. The first two chapters, which might have been subtitled “the birth of the Beth,” offer a satisfying tale of the founding father and mothers (there is transient gender disharmony here), of what began as a

converted house in the “Hill” district in 1902. The newspapers of the day provided a lively Greek chorus. We are introduced to the medical men and women of the early years, including the founder of Beth Israel’s Parsonnet dynasty, and the chaotic early days of the nursing service and school. The Beth’s experience during the 1919 influenza epidemic resonates for us today.

A striking theme throughout the book is the succession of gifted administrators. Each was a man a little ahead of his time and each found new ways to deal with crisis. Nor are women administrators neglected, as they struggle to meet ceaseless demands of nursing, dietary, and social service departments.

The move of the Beth from High Street two miles south to the area of Weequahic Park in 1928 is part of the larger American history of immigrant communities on the move, both socially and geographically. (Missing from the book is a map of Newark in the 1930s, showing the sites of the successive Beth Israel hospitals. This would have been helpful to readers unfamiliar with the city’s geography.) The new Beth epitomized the image of the modern American hospital as a gleaming tower of health. A headline in the local press read “Great Hospital Replaces Little House on the Hill” (p. 77). Dreams were soon tempered by crisis. *Covenant of Care* follows doctors, nurses, ancillary staff, volunteers, administrators, and patients through the Depression years when the Beth, like many voluntary hospitals, survived by desperate and daring feats of financial legerdemain and merciless cost-cutting. The Beth and its staff faced the Second World War in much the same way as urban American hospitals everywhere, and the Krauts paint a lively picture of a stateside hospital at war.

The gleaming tower of health was expected to further medical knowledge. Medical research at the Beth was exemplified by Rita Finkler, a European political activist/anarchist/law student who immigrated to America and graduated from the Woman’s Medical College of Philadelphia. Beginning in the 1930s, Finkler, a practicing obstetrician (and a single mother whose husband left her for Zionist Palestine), conducted important research in the endocrinology of female hormones. For a quarter of a century, from 1950 to 1975, the medical staff published its research in the *Journal of the Beth Israel Hospital* (as well as major national journals), leaving a record of research and technological innovations such as pacemakers, intensive care units, and hemodialysis. In 1969, the Beth, now a regional medical center, affiliated with the University of Medicine and Dentistry of New Jersey,

thus becoming a major teaching hospital.

The authors skillfully portray the new physical plant as the biggest patient of all. Readers, especially those who have served on building committees, will not be surprised to find that the hospital buildings suffered from an endless litany of structural and organizational ailments from the day the first human patient was admitted.

The Beth was a Jewish hospital and the staff worked hard to compensate for systematic anti-Semitism in American medicine. Jewish physicians, like the growing number of African American physicians, suffered from discrimination in admission to hospital staffs. Strict quotas limited would-be medical students, and internship and residency training was often closed to Jews. The barriers were erected close to home; in the 1930s, Newark’s St. Barnabas Hospital categorically denied staff privileges and internship positions to Jewish doctors, although Jewish patients were never denied admission to St. Barnabas.

Urban history is inextricably linked to highway history and thence to suburbanization. The Krauts give us an instructive detour into the highway wars (I78 and Route 280 in particular) that rocked the Weequahic community and its hospital in the postwar era. As Jews and their institutions moved to the suburbs, the Beth struggled with its identity as a Jewish hospital. The hospital staff and patients were increasingly non-Jewish, although most administrators, board members, and physicians were Jewish. At the same time, Jewish doctors were less confined in their practice and staff opportunities at other hospitals. The Beth was rapidly becoming a non-sectarian hospital under Jewish auspices at a time when the “auspices” were being reinvested in the suburbs and in support of the new state of Israel.

One of the great strengths of *Covenant of Care* is its clear explanation of how various pieces of health legislation affected one hospital and its delivery of services. By focusing on the Beth’s response to measures such as the Hill Burton Act, personal health insurance, Blue Cross and Blue Shield (or, informally, “the Blues”), and Medicare, the authors bring some coherence to a field within the history of medicine which most of us find both Byzantine and intimidating. Similarly, we see how medical staff and administrators struggled to keep up with constant advances in professional standards for training and accreditation. Winding through the history of the Beth is the story of its nursing school, medical residents and fellows, laboratories, social services, and the kitchen help, too. It wasn’t easy, but the administration found

ways to live with the unions. The authors turn often to historian Rosemary Stevens's monumental 1989 tome, *In Sickness and in Wealth: Twentieth Century American Hospitals*. *Covenant of Care* shows how Stevens's broad analytical overview worked out in the case of one hospital. What happened at the Beth was not all that different from what happened at many surviving voluntary hospitals across the country, whether ethnic or not, as they negotiated the twentieth century.

The climax of the Beth Israel saga is the decision, taken under the leadership of Lester Bornstein, to remain in Newark following the traumatic urban upheavals of the late 1960s. The thriving Jewish community had moved to the suburbs. Committed to following their traditional "demographics," Clara Maass Hospital and St. Barnabas had already pulled up stakes and headed for the Jersey hills. But the Beth stayed. The plan, largely realized over the past few decades, was to turn the Beth into a regional center of excellence, drawing Jewish patients back from the suburbs while continuing to fulfill its mission. Bornstein wrote: "The hospital was built to fill a need; that need has changed, but a new need exists

and it exists in Newark. And this is where we are going to stay because our needs are vital to this community" (p.187).

Of all the chapters, the epilogue is the only one that sounds a bit like the boilerplate of the community relations department. Perhaps it is too soon for a critical analysis of the fin de twentieth century Beth. In 1996, the Beth was sold to the St. Barnabas Health Care System (who'd have thought?) and students from Mt. Sinai School of Medicine in New York appeared on the wards.

Assimilated beyond the dreams and fears of its founders, the Beth continues to negotiate nimbly a health care environment often characterized in the press as "chaotic." The Beth is like the coat that has been patched so often that none of the original fabric remains—a different coat in its material and construction, but still very much that same warm, comfy old coat in its essential spirit. *Covenant of Care* brings to mind a Talmudic precept from the "Sayings of the Fathers" (*Pirke Avot*): "It is not for you to finish the task; but neither are you free to leave off from it."

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